



OVERSIZE LOAD PERMITS SUBMITTAL REQUIREMENTS E-26

Development Services
Land Development Engineering
1635 Faraday Avenue
442-339-2750
landdev@carlsbadca.gov
www.carlsbadca.gov

An Oversize Load or Overweight Load Permit is required any time a vehicle or object over the legal length, width, height, or weight, is moved through the City of Carlsbad.

Please submit the following:

- ____ 1. Completed application. This will become the permit upon approval.
- ____ 2. If the permit is for an extreme oversize greater than 14 feet wide or over weight load, special approval may be required. Contact the Land Development Engineering Division, (442) 339-2750, for more information.
- ____ 3. Certificate of Insurance. The Trucking Company shall provide a certificate of insurance for personal injury and property damage liability in the amount of at least \$1,000,000 (one million dollars) per incident. Certificates providing less than one month's liability insurance coverage will not be accepted.

Certificate must specifically name the City of Carlsbad as "Additionally Insured", as well as "Certificate Holder". It is the responsibility of the **Trucking Company** to notify the city of any insurance policy changes or extensions.

INSURANCE CARRIER: _____

EXPIRATION DATE: _____

Oversize Load Permit fees:

\$16.00 – Single Trip

\$90.00 – Annual Permit (One year or insurance expiration, whichever occurs first)

Request for permit must be filed at least two working days prior to proposed haul. Please email completed application along with insurance and method of payment to landdev@carlsbadca.gov.



**APPLICATION
OVERSIZE OR OVERWEIGHT
LOAD PERMIT
E-26**

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In compliance with your request and subject to all of the terms, conditions and restrictions written below and the attachments, permission is hereby granted to:		Permit Valid Between _____ AM ____/____/____ _____ PM ____/____/____ And Sunset		Permit Number: _____ _____ Authorized City Representative						
		Moving Authorized								
		Yes No								
		Saturday <input type="checkbox"/> <input type="checkbox"/>								
		Sunday <input type="checkbox"/> <input type="checkbox"/>								
Transporter: _____		Sunset to <input type="checkbox"/> <input type="checkbox"/>		Applicant shall deliver one copy of permit to the City of Carlsbad Police Department. 2560 Orion Way. (or FAX (760) 929-0243)						
Address: _____										
City/State/Zip _____										
Phone No. _____										
FAX No. _____										
<input type="checkbox"/> Haul <input type="checkbox"/> Drive <input type="checkbox"/> Tow		Loan or Equipment and Model No.: _____ Vehicle License No.: _____		Type of Vehicle: _____						
King Pin to Last Axle: _____		Combination Vehicle Length: _____				Sending Station: _____	Receiving Station: _____			
LOADED DIMENSIONS DIFFERENT THAN OR WEIGHTS EXCEEDING THOSE SHOWN BELOW ARE NOT AUTHORIZED										
Maximum Height: _____		Maximum Width: _____				Maximum Overall Length: _____		Maximum Overhang: _____		
Pilot Car Required: _____		<input type="checkbox"/> One (for loads 12' to 14')				<input type="checkbox"/> Two (for loads over 14' wide)				
Axle No.		1	2	3	4	5	6	7	8	9
Number of Tires										
Axle Spacing										
Axle Width										
Weight										
Origin: _____		Destination: _____				Trips: _____				
Authorized Roads and Streets: _____ _____										
This permit covers only travel on streets maintained by the City of Carlsbad. No hauling permitted between 6:00 to 9:00 a.m. and 3:30 to 6:30 p.m. One approved copy of permit must be in vehicle at all times. Permittee shall indemnify, hold harmless and defend the City of Carlsbad or its officers or employees from all claims, damage, or liability to persons or property arising from or caused by any activity or work done pursuant to this permit unless the damage or liability was caused by the sole active negligence of the city or its officers or employees.								Attachments		
								<input type="checkbox"/> Permits Conditions <input type="checkbox"/> Routing Map <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____		
<input type="checkbox"/> Cash Fee: \$ _____ <input type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Exempt		Permittees Authorized Agent (signature) _____				_____/____/____ Date				